

# AHS Integration Efforts

## Autism Planning for the Future

Meeting Minutes

Date: Wednesday, May 25, 2022

2:30-4:00

**Overall Goal of our work group:** How do we use our collective resources to move autism services forward for children and their families in Vermont?

### Strategic Plan Goals:

- A. To challenge and advise the current system to identify creative, collaborative, and flexible strategies to deliver family-centered care throughout a child’s journey from early identification and diagnosis through adult services.
- B. Increase access to assessments, supports and services up and through transition to adulthood.
- C. Educate community about inclusion and neurodiversity.

**Present:** Molly Bumpas, Cheryle Wilcox, Nora Sabo, Jeremiah Dickerson, Kelsey Naro, Danielle Brier, Lyn Ujlaky, Lana Metayer, Alyssa Heilbrunn, Melanie Hall, Philip Eller, Cammie Naylor, Cathy Booth, Michael Hoffnung, Beth Forbes, Hillary Hill, Leslie Johnson, Steve, Keith Williams, Hillary Hill, Mel Houser, Cortney Keene, Liliane Savard, Cathy Booth

- Yellow highlights are notable areas for action this group could take on
- Please see member list—if you need any of your information updated or changed-let Cheryle know.

Which strategic plan goal does this tie to?	Agenda Item	Discussion Notes	Action Steps- What is in your sphere of influence?
Increase access to assessments, supports and services up and through transition to adulthood	Follow up items that have occurred since last month’s meeting about assessments and the CDC clinic closure.	<p><b>Dr. Dickerson</b>-what are folks hearing from families who are on waitlists or trying to access services-what are they saying and struggling with:</p> <ul style="list-style-type: none"> <li>• Medical center is hearing a lot of frustration</li> <li>• Melanie-frustration and having discussion about what families can do while they are waiting. Such as if ABA has been identified a diagnosis isn’t needed to start that support. Also, talking to parents about when children are kicked out of childcare due to struggles and how to manage that. lack of SLP services.</li> <li>• It was emphasized by a parent to remember how emotional this time is for parents when waiting for a diagnosis and/or services as they watch their child struggle and are waiting. This is a real time of emotional stress.</li> </ul> <ul style="list-style-type: none"> <li>• Molly: Ilisa, Adam, Molly, Jeremiah, and Beth are meeting to discuss developmental assessment needs.</li> <li>• Could a virtual support group for parents/caregivers be helpful?</li> </ul>	

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		<p>Update from Adam Poulin, CSHN, who shared this through email with Cheryle:</p> <ul style="list-style-type: none"> <li>• CSHN is working on an infographic/resource doc for families and providers, along the lines of “What to do while you’re waiting for an assessment” <ul style="list-style-type: none"> <li>○ We want to elucidate which systems/services require which Dx, provided by what type of provider, etc.</li> <li>○ We will share/distribute a draft of this at the earliest opportunity with AHS partners for feedback and input – and then push it out through community partners (medical homes, DAs, VFN, etc.)</li> </ul> </li> <li>• Katie Becket is a way to access Medicaid without taking into account income and there is one level of requirement “ in need of constant monitoring”.</li> <li>• EI services (up to age 3) in Vermont-service capacity varies from region to region but eligibility is quite broad.</li> </ul> <p><b>Question from Courtney Keene:</b>  Looking for clarification about the dx that children receive from birth-3 and if those are considered medical or educational. The Vermont Medicaid ABA policy indicates official Early Developmental Diagnosis is covered for ABA but early childhood, OT, SLP are not included in those that can diagnose those per the policy. Developmental Delay that a birth-3 program might provide doesn't meet that criteria. How are others navigating this to get littles access to services, especially while waiting for dx?</p> <ul style="list-style-type: none"> <li>• <b>Danielle Brier:</b> This is the correct policy from Medicaid. If the correct practitioner gave the early developmental diagnosis, then the provider can submit that to Danielle Brier for clinical review.</li> <li>• <b>Molly:</b> They may just need their pediatrician to write a prescription for ABA services based on a developmental delay.</li> <li>• <b>Nora-</b>most referrals now being seen have already been diagnosed with developmental or speech delay by the pediatrician.</li> <li>• <i>Who can do diagnosis? The diagnostic assessment should utilize autism diagnostic tool(s) and must be administered by a qualified professional including: a board certified or board eligible psychiatrist, doctorate-level licensed psychologist, a board certified or</i></li> </ul>	

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		<p><i>board eligible neurologist, a developmental-behavioral or neurodevelopmental disabilities pediatrician, or a masters-level licensed clinician experienced in the diagnosis and treatment of autism.</i></p> <ul style="list-style-type: none"> <li>○ <i>From Office of Professional Regulation:</i></li> <li>○ (D) Licensed independent clinical social workers are qualified to use the Diagnostic and Statistical Manual of Mental Disorders (DSM), the International Classification of Diseases (ICD), and other diagnostic classification systems used in diagnosis and other activities. 26 VSA 3201</li> <li>○ Licensed Mental Health Clinician - (2) "Clinical mental health counseling" means providing, for a consideration, professional counseling services that are primarily drawn from the theory and practice of psychotherapy and the discipline of clinical mental health counseling, involving the application of principles of psychotherapy, human development, learning theory, group dynamics, and the etiology of mental illness and dysfunctional behavior to individuals, couples, families, and groups, for the purposes of treating psychopathology and promoting optimal mental health. The practice of clinical mental health counseling includes diagnosis and treatment of mental conditions or psychiatric disabilities and emotional disorders, psychoeducational techniques aimed at the prevention of such conditions or disabilities, consultations to individuals, couples, families, groups, organizations, and communities, and clinical research into more effective psychotherapeutic treatment modalities. 26 VSA 3261</li> </ul> <p><i>Source:</i>  <a href="http://www.vtmedicaid.com/assets/manuals/ABASupplement.pdf">http://www.vtmedicaid.com/assets/manuals/ABASupplement.pdf</a></p> <p>How do we make information about rules, requirements, etc. easy to read and find for families and providers?</p>	
<p>During updates, consider our goals and updates that may tie directly to them.</p>		<p><b>Lana Metayer:</b></p> <ul style="list-style-type: none"> <li>• Afterschool program run by a private agency denied a youth access to a program because the organization running the club, per their insurance broker, had to cover the PCA with their organization's insurance which was cost prohibitive. Is there an insurance that would cover PCAs so this doesn't</li> </ul>	

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		<p>limit youth who want to participate in programs? Or a way to address this another way? <b>One idea shared:</b> some private mountain biking trails/organization ask you to sign a waiver of responsibility. At a minimal, this might be one possible avenue.</p> <p><b>Danielle Brier, DVHA:</b> Danielle will send powerpoint for review with more information. If you have questions please reach out to her.</p> <ul style="list-style-type: none"> <li>• Funding is being rolled out by DVHA to ABA providers, linking payment to performance—called Value-Based Performance. A brief summary of the proposal for this one-year opportunity is as follows: <ul style="list-style-type: none"> <li>▪ If the federal funding is available, ABA providers could earn up to 1% of their earned tier payments in the form of an additional performance payment during the Calendar Year 2023 reconciliation.</li> <li>▪ Each provider’s performance would be reviewed using three ABA program measures: <ol style="list-style-type: none"> <li>1. The amount of service provided (measured as person months aggregated across all members served by the provider during the year).</li> <li>2. The percentage of billed hours that are direct service hours, and the timeliness of claims submission.</li> <li>3. Each of the first two measures would be weighted at 40%, while the timely claims submission measure would be weighted at 20%.</li> </ol> </li> </ul> </li> </ul> <p><b>Liliane Savard</b></p> <ul style="list-style-type: none"> <li>• Recruiting kids 7-13 with Autism for her dissertation. Got approval to meet children wherever they are.</li> <li>• 3 visits with child and short survey for parents</li> <li>• Recruitment flyer: <a href="https://drive.google.com/file/d/1HCNdKh4p1mw-n5TS6AUJlbnObMCOHmJl/view?usp=sharing">https://drive.google.com/file/d/1HCNdKh4p1mw-n5TS6AUJlbnObMCOHmJl/view?usp=sharing</a></li> <li>• Video: <a href="https://streaming.uvm.edu/watch/43270/motor-learning-and-video-modeling-study">https://streaming.uvm.edu/watch/43270/motor-learning-and-video-modeling-study</a></li> <li>• Liliane contact info: mail or text) <a href="mailto:lsavard@uvm.edu">lsavard@uvm.edu</a>, (802)522-3615</li> </ul> <p><b>Mel Houser</b></p> <ul style="list-style-type: none"> <li>• All Brains Belong is launching a program called Kids Connection, for youth aged 13-17 to be matched in pairs or small groups to connect virtually. To learn more: <a href="https://allbrainsbelong.org/kid-connections/">https://allbrainsbelong.org/kid-connections/</a></li> </ul>	

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		<p><b>Cammie Naylor, Disability Law Project</b></p> <ul style="list-style-type: none"> <li>• H.716 has not yet been signed by the Governor, but it is expected to be signed</li> <li>• Incoming special ed. rules for adverse effect will be delayed until July 2024.</li> <li>• This delay will negatively impact children with autism and on the spectrum. Cammie can share more next month.</li> <li>• Please reach out to Cammie to discuss individual circumstances.</li> </ul>	
<p>Are there topics, issues that any member of this group would like to put on a future agenda or take time today to problem-solve with the group?</p>		<ol style="list-style-type: none"> <li>1. Special Ed rule changes—possibly to talk more</li> <li>2. Community members who have autism are at higher risk of long haul covid and complications from covid.</li> </ol>	
<p><b>Upcoming agenda items:</b></p> <ol style="list-style-type: none"> <li>3. Overview of CANS (Child and Adolescent Needs and Strengths) possible Autism Module</li> <li>4. Who’s voices are missing from this table? How do we solicit their feedback even if they can’t come to the meetings (e.g. survey)?</li> </ol>			